PTO/SB/08A		Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)		Application Number	10/798,651
		Filing Date	March 11, 2004
		Confirmation Number	To be assigned
		First Named Inventor	Jensen
		Group Art Unit	~~To be assigned~~ 3746
		Examiner Name	~~To be assigned~~ P.Berthraud
Sheet	1 of 1	Attorney Docket No.	GDDP 5570

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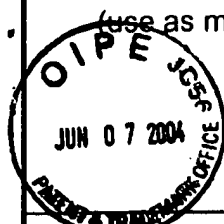
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Examiner Initials*	Cite No.[1]	U.S. Patent Document		Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY
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Examiner Signature	*(signature)*	Date Considered	1/28/08

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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